STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

 Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc

		Main Doci	iment Page 2 of 43	
Fill in this info	ormation to identify your	case:		
Debtor 1	Jacqueline E. Nix			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
Case number	2:17-bk-24180-VZ			
if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	990,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	136,600.49
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,126,600.49
Par	t 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,050,535.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	12,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	0.00
	Your total liabilities	\$	1,063,035.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	12,561.77
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	12,248.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other	schedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a person	al, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document

Debtor 1 Jacqueline E. Nix

Page 3 of 43 (if known) 2:17-bk-24180-VZ

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

17,505.05

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	l claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	12,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	12,500.00

	Cas	se 2:17-bk-24		oc 10	Filed 11/30/17 Entered Document Page 4 of 43	11/30/17	12:54:1	1 Desc
Fill	in this info	ormation to identify						
Deb	otor 1	Jacqueline E	E. Nix	Name	Last Name			
	otor 2 use, if filing)	First Name	Middle	Name	Last Name			
Uni	ted States I	Sankruptcy Court for	the: CENTRAL	DISTRI	CT OF CALIFORNIA			
Cas	se number	2:17-bk-24180-\	/Z				[Check if this is an amended filing
_		orm 106A/E I le A/B: Pr	_					12/15
. De	o you own o	r have any legal or equ	<u> </u>	y reside	Estate You Own or Have an Interest In ence, building, land, or similar property?			
	24107 C	ross Street			Single-family home	Do not dedu	ct secured clain	ns or exemptions. Put the
	Street address	et address, if available, or other description			Duplex or multi-unit building Condominium or cooperative	amount of ar	ny secured clain	ns on Schedule D: Secured by Property.
	Newhall	CA State	91321-0000 ZIP Code		Land	Current valuentire prope		Current value of the portion you own? \$990,000.00
				□ □ Who		(such as fee a life estate	simple, tenan), if known.	r ownership interest cy by the entireties, or
	Loc And	uolo c		_	Debtor 1 only	Mortgage)	
	County	jeies			Debtor 1 and Debtor 2 only	Check (see inst	if this is comm	unity property
					r information you wish to add about this item erty identification number:	, such as loca		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$990,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Main Document Page 5 of 43 Case number (if known) 2:17-bk-24180-VZ Debtor 1 Jacqueline E. Nix 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Acura Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **RDX** Creditors Who Have Claims Secured by Property. Model Debtor 1 only 2015 Year: Debtor 2 only Current value of the Current value of the 15,000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$5,608.00 \$5,608.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Dodge Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: 3500 Model: Creditors Who Have Claims Secured by Property. Debtor 1 only Year: 2005 Debtor 2 only Current value of the Current value of the 205,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$10,000.00 \$10,000.00 ☐ Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$15,608.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Bedroom Sets, Dining Room Set, Living Room Set, Washer, Dryer, \$10,000.00 Fridge, Stove 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe.....

TV, Desktop, computer, cell phone

\$1,000.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Debtor 1	Jacqueline E. Nix	Main Document	Page 6 of	43 Case number (if known)	2:17-bk-24180-VZ
☐ Yes.	Describe				
Example No ■	musical instruments	e, and other hobby equipment; bicy	/cles, pool tables, (golf clubs, skis; canoes	and kayaks; carpentry tools;
	Describe				
■ No	ms bles: Pistols, rifles, shotguns, ami Describe	munition, and related equipment			
□ No		er coats, designer wear, shoes, ac	cessories		
	Everyday W	ear			\$2,000.00
					<u></u>
□ No		ewelry, engagement rings, wedding	g rings, heirloom je	welry, watches, gems, ç	gold, silver
	Misc Costur	ne Jewelry			\$5,000.00
Exam _l □ No	nrm animals oles: Dogs, cats, birds, horses Describe				
	2 Cats				\$50.00
■ No □ Yes.	Give specific information	ems you did not already list, including any o	entries for pages	_	\$18,050.00
101 F	art 3. Write that number here				
	scribe Your Financial Assets				
Do you ov	vn or have any legal or equitabl	le interest in any of the following	1?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		et, in your home, in a safe deposit		when you file your petiti	on
		financial accounts; certificates of d iple accounts with the same institu		redit unions, brokerage	houses, and other similar
_		Institution nam	e:		

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc

Official Form 106A/B Schedule A/B: Property page 3

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 7 of 43

Case number (if known) 2:17-bk-24180-VZ Debtor 1 Jacqueline E. Nix Bank of America \$19,742,49 17.1. Checking **Bank of America** \$8,700.00 17.2. Savings \$4,500.00 Wells Fargo Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name 401(k) 401 \$70,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them...

Official Form 106A/B Schedule A/B: Property page 4

Dob	tor 1	Case 2:17-bk-24180-VZ	Doc 10 Filed 11 Main Document		8 of 43			Desc
Deb	tor 1	Jacqueline E. Nix			Case number	(If Known)	2:17-DK-	2418U-VZ
	Exan No	uses, franchises, and other general in inples: Building permits, exclusive licens is. Give specific information about them	es, cooperative association	holdings, liq	uor licenses, professio	onal licenses	3	
Mon	nev o	r property owed to you?					Curre	nt value of the
	,						portio Do no	on you own? t deduct secured s or exemptions.
_	Γax re I No	efunds owed to you						
] Yes	s. Give specific information about them,	including whether you alrea	ady filed the I	returns and the tax yea	ars	_	
	Famil Exan	l y support nples: Past due or lump sum alimony, s	pousal support, child suppo	rt, maintena	nce, divorce settlemen	nt, property s	settlemen	t
] Yes	s. Give specific information						
	Exan	r amounts someone owes you nples: Unpaid wages, disability insurand benefits; unpaid loans you made	ce payments, disability bene to someone else	efits, sick pay	, vacation pay, worke	ers' compens	sation, So	ocial Security
	No Yes	s. Give specific information						
_	Exan	ests in insurance policies inples: Health, disability, or life insurance	e; health savings account (H	HSA); credit,	homeowner's, or rente	er's insuranc	e	
_	No 1	Name the Summer of a set	on a Paris and Paristance by					
_	ı Yes	s. Name the insurance company of each Company name		E	Beneficiary:		Surre value	ender or refund e:
	If you	nterest in property that is due you from a re the beneficiary of a living trust, expense has died.			y, or are currently enti	tled to receiv	ve proper	ty because
] Yes	s. Give specific information						
_		ns against third parties, whether or na nples: Accidents, employment disputes,			demand for payment	:		
] Yes	s. Describe each claim						
	Othe No	contingent and unliquidated claims	of every nature, including	g countercla	ims of the debtor and	d rights to s	set off cla	aims
] Yes	s. Describe each claim						
_	Any f No	inancial assets you did not already li	st					
] Yes	s. Give specific information						
36.		the dollar value of all of your entries Part 4. Write that number here						\$102,942.49
						-		

Official Form 106A/B Schedule A/B: Property page 5

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

■ No. Go to Part 6.□ Yes. Go to line 38.

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc

Case number (if known) 2:17-bk-24180-VZ Debtor 1 Jacqueline E. Nix Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$990,000.00 Part 2: Total vehicles, line 5 \$15,608.00 Part 3: Total personal and household items, line 15 57. \$18,050.00 58. Part 4: Total financial assets, line 36 \$102,942.49 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$136,600.49 Copy personal property total \$136,600.49

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$1,126,600,49

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Des

		Main Ducu	Helli Faue 10 012	+3	
Fill in this info	rmation to identify your	case:			
Debtor 1	Jacqueline E. Nix	(
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number	2:17-bk-24180-VZ				
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Edition identity the Property for Claim as Exem	Part 1:	roperty You Claim as Exempt
---	---------	-----------------------------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
,	Copy the value from Schedule A/B	Che			
2005 Dodge 3500 205,000 miles Line from <i>Schedule A/B</i> : 3.2	\$10,000.00		\$5,350.00	C.C.P. § 703.140(b)(2)	
Line IIIIII Schedule A/B. 3.2		100% of fair market value, up to any applicable statutory limit			
2005 Dodge 3500 205,000 miles Line from Schedule A/B: 3.2	\$10,000.00		\$4,650.00	C.C.P. § 703.140(b)(5)	
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
Bedroom Sets, Dining Room Set, Living Room Set, Washer, Dryer,	\$10,000.00		\$10,000.00	C.C.P. § 703.140(b)(3)	
Fridge, Stove, Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
TV, Desktop, computer, cell phone Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(3)	
Line from Scriedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit		
Everyday Wear	\$2,000.00		\$2,000.00	C.C.P. § 703.140(b)(3)	
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 11 of 43

Case number (if known) 2:17-bk-24180-VZ

	Jacqueline E. NIX			Case number (if known)	2:17-DK-2418U-VZ
	description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	c Costume Jewelry from Schedule A/B: 12.1	\$5,000.00		\$1,600.00	C.C.P. § 703.140(b)(4)
LINE	TOTT SCHEUUE PAB. 12.1			100% of fair market value, up to any applicable statutory limit	
	Costume Jewelry	\$5,000.00		\$3,400.00	C.C.P. § 703.140(b)(5)
Line	e from Scriedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	cking: Bank of America	\$19,742.49		\$19,742.49	C.C.P. § 703.140(b)(5)
LINE	TOTT SCHEUUE PAB. 11.1			100% of fair market value, up to any applicable statutory limit	
	ngs: Bank of America	\$8,700.00	•	\$432.51	C.C.P. § 703.140(b)(5)
Line from Schedule AVB. 11.2				100% of fair market value, up to any applicable statutory limit	
•	k): 401 from Schedule A/B: 21.1	\$70,000.00		\$70,000.00	C.C.P. § 703.140(b)(10)(E)
Line from Scriedule A/B; 21.1				100% of fair market value, up to any applicable statutory limit	

Yes

		Main Document F	Page 12	2 of 43		
Fill in this informati	on to identify yοι	ır case:				
Debtor 1	Jacqueline E. N	iv				
	First Name	Middle Name Last N	lame			
Debtor 2						
	First Name	Middle Name Last N	lame			
United States Bankru	intov Court for the	: CENTRAL DISTRICT OF CALIFORN	ΙΔ			
Officed States Darikit	ipicy Court for the	CENTRAL DISTRICT OF CALIFORN	<u> </u>			
Case number 2:17	7-bk-24180-VZ					
(if known)					☐ Check	if this is an
					amend	ed filing
Official Form 1	06D					
Schedule D:	Creditors	Who Have Claims Sec	ured b	ov Property	/	12/15
	0.04.10.0	Wile Have claime see		 		,.,
		f two married people are filing together, both , number the entries, and attach it to this form				
1. Do any creditors have	e claims secured by	vour property?				
	-	his form to the court with your other scheo	tules You	have nothing else t	o report on this form	
_		·	adics. Tod	riave nothing cise t	o report on this form.	
■ Yes. Fill in all	of the information	below.				
Part 1: List All Se	cured Claims					
		nore than one secured claim, list the creditor sep		Column A	Column B	Column C
		articular claim, list the other creditors in Part 2. A		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
as possible, list the claims in alphabetical orde		or according to the croality of hame.		value of collateral.	claim	If any
2.1 American Ho	nda	Describe the property that secures the claim	n:	\$5,608.00	\$5,608.00	\$0.00
Creditor's Name		2015 Acura RDX 15,000 miles				
D- D 4000	00	As of the date you file, the claim is: Check all	l that			
Po Box 16808 Irving, TX 750		apply.				
		Contingent				
Number, Street, City	, State & Zip Code	☐ Unliquidated				
Who owes the debt?	Chack and	☐ Disputed Nature of lien. Check all that apply.				
_	Check one.	An agreement you made (such as mortgage		J		
■ Debtor 1 only		car loan)	e or secured	1		
Debtor 2 only		,				
Debtor 1 and Debtor	-	☐ Statutory lien (such as tax lien, mechanic's	lien)			
At least one of the de		☐ Judgment lien from a lawsuit	aaraam	ont		
Check if this claim community debt	relates to a	Other (including a right to offset)	e agreem	ent		
community dobt						
	Opened					
	02/16 Last					
Data dalat in	Active	lact delicita of account country	2534			
Date debt was incurred	11/15/17	Last 4 digits of account number				
20 5 0				* 4 * 4 * * * * * * * * * *	4000 000 00	\$54.007.00
2.2 Fay Servicing	g LLC	Describe the property that secures the claim	n:	\$1,044,927.00	\$990,000.00	\$54,927.00
Creditor's Name		24107 Cross Street Newhall, CA				
		91321 Los Angeles County				
440 S La Sall	e St Ste 20	As of the date you file, the claim is: Check all	that			
Chicago, IL 6		apply. ☐ Contingent				
Number, Street, City		☐ Unliquidated				
rtanibol, Garoot, Glay	, claic a <u>Lip</u> codo	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mortgage	e or secured	i		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)			
☐ At least one of the de		☐ Judgment lien from a lawsuit	11011)			

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 13 of 43

Debtor 1 Jacquelin	e E. Nix		Case number (if know)	2:17-bk-24180-VZ	
First Name	Middle Name	e Last Name			
☐ Check if this claim re community debt	elates to a	Other (including a right to offset)			
Date debt was incurred	Opened 01/11 Last Active 6/15/15	Last 4 digits of account number	1251		
	of your form, add the	mn A on this page. Write that number he dollar value totals from all pages.	re: \$1,050,535 \$1,050,535		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case	2:17-bk-24180-VZ	Doc 10 Filed 11/30 Main Document)/17 En <u>Page 14</u>	tered 11/30/1 of 43	7 12:54:11	Desc
Filli	in this inform	nation to identify your case:	man Boommon	400 -	01-10		
Deb	tor 1	Jacqueline E. Nix First Name	Middle Name Last	Name			
	tor 2 use if, filing)	First Name	Middle Name Last I	Name			
Unite	ed States Ban	kruptcy Court for the: CEN	TRAL DISTRICT OF CALIFORN	IIA			
Case (if kno		:17-bk-24180-VZ					if this is an ed filing
	icial Form nedule E/		Have Unsecured Cla	ims			12/15
ny e Sched D: Cre he Ce	xecutory contra dule G: Executo editors Who Ha	acts or unexpired leases that cou ory Contracts and Unexpired Lea ove Claims Secured by Property.	for creditors with PRIORITY claims ald result in a claim. Also list execu- ises (Official Form 106G). Do not in If more space is needed, copy the l formation to report in a Part, do not	utory contracts clude any cred Part you need,	on Schedule A/B: Pro itors with partially sec fill it out, number the	perty (Official Form cured claims that are entries in the boxes of	106A/B) and on listed in Schedule on the left. Attach
Part	1: List All	of Your PRIORITY Unsecure	ed Claims				
1. [Do any creditor	s have priority unsecured claims	s against you?				
I	No. Go to Pa	rt 2.					
١	Yes.						
i F	identify what type possible, list the	e of claim it is. If a claim has both p	editor has more than one priority unse priority and nonpriority amounts, list the ding to the creditor's name. If you have , list the other creditors in Part 3.	at claim here an	d show both priority and	d nonpriority amounts.	As much as
((For an explanat	ion of each type of claim, see the in	nstructions for this form in the instruct	ion booklet.)			
	1	7 ,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Total claim	Priority amount	Nonpriority amount
2.1		se Tax Board	Last 4 digits of account numl	ber	\$4,000.00	\$4,000.00	\$0.00
	Bankrup PO BOX		When was the debt incurred?	2016			
		ento, CA 95812 eet City State Zlp Code	As of the date you file, the cla	nim ie: Chock o	Il that apply		
		the debt? Check one.	Contingent	aiii is. Oneon a	п шасарру		
- Contingent							
	_	•	☐ Unliquidated				
	☐ Debtor 2 on		Disputed	Loloimu			
	_	d Debtor 2 only	Type of PRIORITY unsecured				
		e of the debtors and another	☐ Domestic support obligation	ns			
	☐ Check if th	is claim is for a community debt		•	0		
	Is the claim su	ibject to offset?	Claims for death or personal	al injury while yo	u were intoxicated		

■ No

☐ Yes

☐ Other. Specify _

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 15 of 43

Deptor	1 Jac	queiin	ie E. NIX		C	ase ni	umber (if know)	2:17-bk-2418	3U-VZ		
2.2			venue Service	Last 4 digits of account number			\$8,500.00	\$8,500.	.00	\$0.00	
	,	Creditor's		When was the debt incurred?	201	6					
	Phila	delphia	a, PA 19101 City State Zlp Code	As of the date you file the claim	As of the date you file, the claim is: Check all that apply						
w			debt? Check one.	Contingent							
	Debtor	1 only		☐ Unliquidated							
	Debtor	,		☐ Disputed							
_	_	•	ebtor 2 only	Type of PRIORITY unsecured cla	im·						
_	_		he debtors and another	☐ Domestic support obligations	•••••						
				■ Taxes and certain other debts v		a 4b a a a					
			aim is for a community debt	Claims for death or personal in		•					
	No	n oubjec				•	noro intoxioatoa				
] Yes										
Part 2:	List	All of Y	Your NONPRIORITY Unsecu	ured Claims							
			ve nonpriority unsecured claims								
_	•		. ,	his form to the court with your other s	chodul	00					
_		nave not	riing to report in this part. Submit t	nis ionn to the court with your other s	criedui	es.					
	Yes.										
				alphabetical order of the creditor we chaim listed, identify what type of c							
				in Part 3.If you have more than three							
									Total clain	n	
4.1			n Frappier Treder	Last 4 digits of account numb	er _	1311		_		\$0.00	
	Nonpric	ority Cred	litor's Name	When was the debt incurred?							
	Numbe	r Street (City State Zlp Code	As of the date you file, the cla	im ie:	Chack :	all that apply				
	Who incurred the debt? Check one.			_		Oncor	ан тат арргу				
	■ Deb	tor 1 only	V	☐ Contingent							
		tor 2 only	•	☐ Unliquidated							
			d Debtor 2 only	•	☐ Disputed						
	☐ At le	east one	of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans							
			s claim is for a community debt		enarat	ion agr	eement or divorce tha	et vou did not			
			bject to offset?	report as priority claims	осранас	ion agri	cernent of divorce the	t you did not			
	■ No			☐ Debts to pension or profit-sh	aring p	lans, a	nd other similar debts	1			
	☐ Yes			Other. Specify listed for	Other, Specify listed for notification purpose						
				. ,							
Part 3:	List	Others	s to Be Notified About a Deb	t That You Already Listed							
				out your bankruptcy, for a debt tha one else, list the original creditor in							
more	than one	credito	or for any of the debts that you lis	sted in Parts 1 or 2, list the addition							
any d	ebts in P	arts 1 o	r 2, do not fill out or submit this	page.							
Part 4:	Add	I the An	mounts for Each Type of Un	secured Claim							
	the amo		certain types of unsecured claim	s. This information is for statistica	ıl repoi	ting pu	urposes only. 28 U.S	.C. §159. Add the	e amounts	for each type	
or uni	300u. 0u	olulli.					Total Cl	aim			
		6a.	Domestic support obligations			6a.	\$	0.00			
Total cl		C.L.	Toyon and partain other dalita	you awa the government		6h	Φ.				
IIOIII F	art 1	6b. 6c.	Taxes and certain other debts Claims for death or personal in	jou owe the government jury while you were intoxicated		6b. 6c.	\$ 	12,500.00			
		6d.	-	cured claims. Write that amount here		6d.	\$	0.00			
									_		
		6e.	Total Priority. Add lines 6a thro	ugh 6d.		6e.	\$	12,500.00			
							Total Cl	aim			

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document

Page 16 of 43
Case number (if know) Debtor 1 Jacqueline E. Nix 2:17-bk-24180-VZ

	6f.	Student loans	6f.	\$ 0.00	
Total clai	6g.	Obligations arising out of a separation agreement or divorce that you		0.00	
	- 3	did not report as priority claims	6g.	\$ 0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 0.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 0.00	

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc

		Mulli Doca	HOLL LUGGET OF TO	
Fill in this info	ormation to identify your	case:		
Debtor 1	Jacqueline E. Nix			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		CENTRAL DISTRICT O	F CALIFORNIA	
Case number	2:17-bk-24180-VZ			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	Zii Codo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>

		Main Docume	nt Page 1	.8 of 43	
Fill in this in	formation to identify your	case:			
Debtor 1	Jacqueline E. Nix				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	CENTRAL DISTRICT OF C	ALIFORNIA		
Case number (if known)	2:17-bk-24180-VZ				☐ Check if this is an amended filing
	Form 106H le H: Your Cod	ebtors			12/15
eople are fili	ng together, both are equ	ally responsible for supplying boxes on the left. Attach the	ng correct informa	tion. If more space is	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
1. Do you	u have any codebtors? (If	you are filing a joint case, do r	not list either spous	e as a codebtor.	
■ No □ Yes					
		I lived in a community prope Nevada, New Mexico, Puerto			rty states and territories include
	id your spouse, former spo	use, or legal equivalent live wi	th you at the time?		
	In which community state	e or territory did you live?	-NONE-	. Fill in the name a	and current address of that person.
	Name of your spouse, former sp				
in line 2	again as a codebtor only i 6D), Schedule E/F (Official	ors. Do not include your spo f that person is a guarantor	or cosigner. Make	sure you have listed	ng with you. List the person showr the creditor on Schedule D (Officia , Schedule E/F, or Schedule G to
	<i>lumn 1:</i> Your codebtor le, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				Schedule D, lin	
Nan	ne			☐ Schedule E/F,☐ Schedule G, lir	
Nun City		State	ZIP Code	_	
3.2 Nam	ne			☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, lin☐	line
Nun	nber Street			_	

State

City

ZIP Code

Fill in this informat	tion to identify your case:	
Debtor 1	Jacqueline E. Nix	
Debtor 2 (Spouse, if filing)		
United States Ban	nkruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA	
Case number (If known)	2:17-bk-24180-VZ	Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	rm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe Employment				
	I in your employment ormation.		Debtor 1	Debtor 2 or non-filing spouse	
,	ou have more than one job,	Employment status	■ Employed	■ Employed	
	ttach a separate page with formation about additional	Employment status	☐ Not employed	☐ Not employed	
em	ployers.	Occupation	RN	General Manger	
	lude part-time, seasonal, or f-employed work.	Employer's name	Providence Holy Cross Medical Center	Valencia Country Club	
	Occupation may include student or homemaker, if it applies. Employer's address		15031 Rinaldy St Mission Hills, CA 91345	273330 North Tourney RD Reseda, CA 91335	
		How long employed the	nere? 15 years	2 1/2 years	

Give Details About Monthly Income Part 2:

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay. 3.

Calculate gross Income. Add line 2 + line 3.

For Debtor 2 or For Debtor 1 non-filing spouse 11,250.00 6,255.05 0.00 0.00 6,255.05 11,250.00

Schedule I: Your Income Official Form 106I page 1

Deb	tor 1	Jacqueline E. Nix	-	Ca	se number (<i>if kn</i>	own)	2:17-bk-2	24180-VZ	· •	
	Cor	ny line 4 hore	4.	F	or Debtor 1	0.5		g spouse	_	
	Cot	by line 4 here	4.	Φ	6,255	.05	Φ	11,250.00	_	
5.	List	t all payroll deductions:								
	5a.	•	5a.				\$	3,174.18	_	
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.			.00	\$ \$	0.00	_	
	5d.	Required repayments of retirement fund loans	5d.			.00	\$	0.00	_	
	5e.	Insurance	5e.			.00	\$	0.00	_	
	5f.	Domestic support obligations	5f.			.00	\$	0.00		
	5g.	Union dues	5g.	. \$.00	\$	0.00		
	5h.	Other deductions. Specify:	_ 5h	.+ \$	C	.00	+ \$	0.00		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,769	.10	\$	3,174.18	<u> </u>	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,485	.95	\$	8,075.82	<u>!</u>	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	. \$	0	.00	\$	0.00)	
	8b.	Interest and dividends	8b.	. \$	0	.00	\$	0.00		
	8c. 8d.	. ,	8c. 8d.	. \$	0	0.00	\$	0.00 0.00	<u> </u>	
	8e.	Social Security	8e.	. \$	0	.00	\$	0.00	<u></u>	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g.			0.00	\$	0.00 0.00	_	
	8h.	Other monthly income. Specify:	8h.			.00		0.00		
9.	Adc	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_		.00	\$	0.0	_	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4,485.95	+ \$	8,075.8	32 = \$	12,561.77	
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*—	4,400.00	`\	0,010.0		12,001111	
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.									
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies						2. \$	12,561.77	
13.	Do	you expect an increase or decrease within the year after you file this form	?					Combi month	ned ly income	
		No. Yes Evolain:								

						-				
Fill	in this inforn	nation to identify yo	our case:							
Deb	tor 1	Jacqueline E	. Nix			Check if this is: An amended filing				
Deb	tor 2							J	ving postpetition chapter	
(Spc	ouse, if filing)					_	13	expenses as of	the following date:	
Unit	ed States Ban	kruptcy Court for the:	CENTR	AL DISTRICT OF CALIF	FORNIA		M	M / DD / YYYY		
1	e number	2:17-bk-24180-V	'Z							
Of	fficial F	orm 106J								
Sc	chedul	e J: Your I	 Exper	ISAS					12/1	
Be info	as complete ormation. If mber (if kno	e and accurate as more space is ne wn). Answer ever	possible. eded, atta y question	If two married people ch another sheet to th						
Par 1.	t 1: Des	cribe Your House	hold							
١.	■ No. Go									
		oes Debtor 2 live i	in a separ	ate household?						
			st file Offici	al Form 106J-2, Expens	ses for Separate Hous	sehold of D	ebto	r 2.		
2.	Do vou ha	ve dependents?	□ No							
	Do not list and Debto	Debtor 1	Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?	
	Do not sta				son (student)			18	□ No ■ Yes	
	dependent	s names.			oon (otadont)				■ Yes □ No	
					daughter (stu	dent)		21	■ Yes	
									□ No	
							_		☐ Yes ☐ No	
									☐ Yes	
3.	expenses	xpenses include of people other th nd your depender	han $_{oldsymbol{\square}}$	No Yes					00	
exp	imate your	f a date after the b	our bankru	uptcy filing date unless					apter 13 case to report of the form and fill in the	
the		ch assistance and		government assistanc luded it on <i>Schedule l</i>				Your expe	enses	
4.		or home owners		ses for your residence r lot.	. Include first mortgag	ge 4.	\$		6,800.00	
	If not incl	uded in line 4:	-				_			
	4a. Rea	l estate taxes				4a.	\$		0.00	
	4b. Prop	erty, homeowner's				4b.			0.00	
		ne maintenance, re				4c.	_		100.00	
F		neowner's associat			homo oquity loons	4d. 5.			0.00	
5.	Auditiona	mongage payme	ine for yo	our residence, such as l	nome equity loans	ວ.	Φ		0.00	

Debtor	Jacqueline E. Nix	Case num	ber (if known)	2:17-bk-24180-VZ		
6. Ut 6a	ilities: . Electricity, heat, natural gas	6a.	\$	200.00		
6b	•	6b.	·	180.00		
60		6c.	· · — — —	420.00		
6d		6d.	· -	283.00		
ou	· · · · <u> · · · · · · · · · · · · · ·</u>	ou.	\$	70.00		
Ea	gas od and housekeeping supplies		·			
	od and nodsekeeping supplies iildcare and children's education costs	7. 8.	\$ ———	1,100.00		
		o. 9.	\$ ———	0.00		
	othing, laundry, and dry cleaning ersonal care products and services	9. 10.	\$	200.00		
	edical and dental expenses	10.		200.00		
	ansportation. Include gas, maintenance, bus or train fare.	11.	Φ	150.00		
	onot include car payments.	12.	\$	600.00		
	tertainment, clubs, recreation, newspapers, magazines, and books	13.		170.00		
	naritable contributions and religious donations	14.	· · —	0.00		
	surance.			0.00		
	onot include insurance deducted from your pay or included in lines 4 or 20.					
	a. Life insurance	15a.	\$	75.00		
15	b. Health insurance	15b.	\$	150.00		
15	c. Vehicle insurance	15c.	\$	850.00		
15	d. Other insurance. Specify:	15d.	\$	0.00		
6. Ta	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	 16.	\$	0.00		
	stallment or lease payments:			0.00		
	a. Car payments for Vehicle 1	17a.	\$	400.00		
	b. Car payments for Vehicle 2	17b.	·	0.00		
	c. Other. Specify:	17c.	· -	0.00		
	d. Other. Specify:	17d.	· -	0.00		
	our payments of alimony, maintenance, and support that you did not report as		·			
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).						
	her payments you make to support others who do not live with you.		\$	0.00		
	ecify:	19.				
	her real property expenses not included in lines 4 or 5 of this form or on Sch					
	a. Mortgages on other property	20a.		0.00		
20	b. Real estate taxes	20b.	\$	0.00		
	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00		
	d. Maintenance, repair, and upkeep expenses	20d.		0.00		
20	e. Homeowner's association or condominium dues	20e.	\$	0.00		
1. O t	her: Specify: Husband's credit card payment	21.	+\$	300.00		
	lculate your monthly expenses					
	a. Add lines 4 through 21.		\$	12,248.00		
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$			
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	12,248.00		
3. C a	lculate your monthly net income.					
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	12,561.77		
23	b. Copy your monthly expenses from line 22c above.	23b.	-\$	12,248.00		
23	 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c.	\$	313.77		
Fo mo	e you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your ridification to the terms of your mortgage? No.			se or decrease because of a		
	Yes. Explain here:					

Fill in this inf	ormation to identify your	case:				
Debtor 1	Jacqueline E. Nix					
	First Name	Middle Name	Las	t Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States	Bankruptcy Court for the:	CENTRAL DISTRICT	OF CALIFOR	NIA		
Case number	2:17-bk-24180-VZ					
(if known)						Check if this is an amended filing
Official Fo	orm 106Dec					
Declara	ation About a	n Individua	l Debte	or's Scho	edules	12/15
, ,	. 18 U.S.C. §§ 152, 1341, 1 ign Below	519, and 3571.				
Did you	pay or agree to pay some	one who is NOT an atto	orney to help	you fill out ban	kruptcy forms?	
■ No						
☐ Yes	nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)					
	nalty of perjury, I declare are true and correct.	that I have read the su	mmary and s	schedules filed v	with this declarat	ion and
X /s/ J	acqueline E. Nix		Х			
Jaco	queline E. Nix ature of Debtor 1			Signature of De	btor 2	
Date	November 30, 2017			Date		

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 24 of 43

No								
Debtor 2 First Name	Fill	in this in	formation to identify you	r case:				
Debtor 2 Case number 2:17-bk-24180-VZ	Deb	otor 1		x				
United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number 2:17-bk-24180-VZ	D - I	10	First Name	Middle Name		Last Name		
Case number 2:17-bk-24180-VZ Check if this is an amended filling			First Name	Middle Name		Last Name		
Case number 2:17-bk-24180-VZ Check if this is an amended filling	Unit	ed States	Bankruptcy Court for the:	CENTRAL DISTRICT O	F CALI	FORNIA		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married No the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there 8. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property cates and territories include Anzona, California, Idaho, Louisiana, Nevadia, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No No Yes, Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Debtor 1 Sources of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Check all that apply. Bebtor 2 Sources of income Check all that apply. Check all that apply. Bebtor 2 Sources of income Check all that apply. Check all that apply. Bebtor 2 Sources of income Check all that apply. Bebtor 3 Sources of income Check all that apply. Bebtor 4 Sources of income Check all that apply. Bebtor 4 Sources of income Check all that apply. Bebtor 4 Sources of income Check all that apply. Bebtor 5 Sources of income Check all that apply. Bebtor 6 Sources of income Check all that apply. Bebtor 8 Sources of income Check all that apply. Bebt								
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 3e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more pasce is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 2art 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? 3 Married 3 No Yes. List all of the places you lived anywhere other than where you live now? 4 Debtor 1 Prior Address: 4 Dates Debtor 1 Debtor 2 Prior Address: 5 Dates Debtor 1 Debtor 2 Prior Address: 5 Dates Debtor 2 Debtor 4 Prior Address: 6 Dates Debtor 1 Debtor 2 Prior Address: 7 Dates Debtor 1 Debtor 2 Prior Address: 8 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) 9 No 1 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). 2 Explain the Sources of Your Income 1 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. 1 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. 8 Debtor 1 8 Sources of Income Check all that apply. 9 Cross Income Check all that apply. 1 Poletor deductions and exclusions) 2 Sources of income Check all that apply. 2 Sources of income Check all that apply. 3 Sources of income Check all that apply. 4 Debtor 2 5 Sources of income Check all that apply. 5 Sources of income Check all that apply. 6 Sources of income Check all that apply. 7 Sources of income Ch			2:17-bk-24180-VZ				ПС	hack if this is an
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What is your current marital status? Married	Par	t 1: Gi	ve Details About Your Ma	rital Status and Where Yo	u Live	ed Before		
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During the last 3 years, have you lived anywhere other than where you live now? No		■ Mar	ried					
No		□ Not	married					
No	2.	During t	he last 3 years, have you	lived anywhere other than	where	e you live now?		
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□ No ■ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 3. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. □ No ■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: □ No □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips								
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Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips								
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If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$248,492.34 Wages, commissions, bonuses, tips	4.	•	_		-		•	ndar years?
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$248,492.34 Umages, commissions, bonuses, tips Surces of income (before deductions and exclusions) Debtor 2 Sources of income (before deductions and exclusions)								
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the date you filed for bankruptcy: Wages, commissions, bonuses, tips Do with the date you filed for bankruptcy:				Chook all that apply.	,		Oncok all trial apply.	(
the date you filed for bankruptcy: Wages, commissions, bonuses, tips Do with the date you filed for bankruptcy:	Fro	m Janua	ry 1 of current year until	Wages commissions		\$248,492.34	☐ Wages, commissions.	
☐ Operating a business ☐ Operating a business						,		
				☐ Operating a business			☐ Operating a business	

Official Form 107

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document

Page 25 of 43

Case number (if known) 2:17-bk-24180-VZ Debtor 1 Jacqueline E. Nix

					Debtor 1					Debtor 2		
						of income that apply.	(befo	ss income ore deductions an usions)	nd	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December :	31, 2016)	■ Wages bonuses,	s, commissions, tips		\$213,368.0	00	☐ Wages, combonuses, tips	nmissions,	
					☐ Operat	ing a business				☐ Operating a	business	
			dar year bef December 3		■ Wages bonuses,	s, commissions,		\$188,998.0	00	☐ Wages, combonuses, tips	nmissions,	
					☐ Operat	ing a business				☐ Operating a	business	
	une gam	mployinbling a each s	ment, and ot and lottery w	her public be innings. If yo he gross inco	nefit payme u are filing	me is taxable. Exents; pensions; real joint case and yach source separa	ntal inco ou have	me; interest; divi	dend rece	s; money collect ived together, lis	ed from laws t it only once	uits; royalties; and
					Debtor 1					Debtor 2		
					Sources of Describe b		each (befo	ss income from a source ore deductions an usions)	nd	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Befo	re You Filed for	Bankru	ptcy				
6.	Are □	No.	Neither Deindividual puring the No. Yes	ebtor 1 nor Derimarily for a 90 days befor Go to line 7 List below e paid that crunot include to adjustment of Debtor 2 of 90 days befor Go to line 7 List below e	personal, for you filed to ach creditor. Do no payments to to 1/1/19 r both have re you filed to ach creditor.	amily, or househor for bankruptcy, d r to whom you pa ot include payme o an attorney for t and every 3 year e primarily consi for bankruptcy, d r to whom you pa	umer de old purpo id you p id a tota nts for d his bank rs after t umer de id you p	ebts. Consumer of ose." ay any creditor a I of \$6,425* or momestic support of cruptcy case. hat for cases filed ebts. ay any creditor a I of \$600 or more	total ore ir obligated on total	of \$6,425* or more partial or after the date of \$600 or more the total amount	ore? yments and thild support and adjustment?	at creditor. Do not
						omestic support o kruptcy case.	bligation	ns, such as child	supp	ort and alimony.	Also, do not	include payments to
	Cre	editor'	s Name and	I Address		Dates of payme	ent	Total amount		Amount you still owe	Was this p	payment for

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Page 26 of 43

Case number (if known) 2:17-bk-24180-VZ Main Document

Debtor 1 Jacqueline E. Nix

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
	☐ Yes. List all payments to an insider.									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No		ments or transfer	any property on a	ccount of a d	ebt that benefited an				
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name				
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures								
9.	Within 1 year before you filed for bankrupte. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of th	e case				
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed,	foreclosed, garnis	shed, attached	d, seized, or levied?				
	Creditor Name and Address	Describe the Property		Date		Value of the property				
		Explain what happened	d		ргорогту					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fi	inancial institutio	n, set off any	amounts from your				
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount				
	Within 1 year before you filed for bankruptocourt-appointed receiver, a custodian, or a No Yes List Certain Gifts and Contributions		erty in the possess	sion of an assigne	e for the bend	efit of creditors, a				
					20	•				
13.	Within 2 years before you filed for bankrup ☐ No Yes Fill in the details for each gift	tcy, did you give any gift	s with a total value	e of more than \$60	00 per person	?				
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value				
	Person to Whom You Gave the Gift and Address:									

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Page 27 of 43

Case number (if known) 2:17-bk-24180-VZ Main Document

Debtor 1 Jacqueline E. Nix

	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
	Chad Nix 253 Owens St South Gresham, OR 97030-2000	wedding gift	2/20017	\$5,000.00
	Person's relationship to you: son			
14.	Within 2 years before you filed for bankrup	otcy, did you give any gifts or contributions with	h a total value of more thar	s600 to any charity?
	No☐ Yes. Fill in the details for each gift or cor			
	Gifts or contributions to charities that tot more than \$600 Charity's Name		Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code)			
Pai	tt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupt disaster, or gambling?	cy or since you filed for bankruptcy, did you lo	se anything because of the	ft, fire, other
	■ No			
	Yes. Fill in the details.			
	how the loss occurred In	escribe any insurance coverage for the loss aclude the amount that insurance has paid. List ending insurance claims on line 33 of Schedule Altroperty.	Date of your loss	Value of property lost
Par	rt 7: List Certain Payments or Transfers	торы у.		
40	<u> </u>		If now on transfer any prope	
16.	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your beha eparing a bankruptcy petition? parers, or credit counseling agencies for services		erty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Oaktree Law 10900 183rd Street Suite 270 Cerritos, CA 90703	Attorney Fees	11/17/2017	\$4,000.00
17.		cy, did you or anyone else acting on your beha ors or to make payments to your creditors? ou listed on line 16.	If pay or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
			mauc	

Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Case 2:17-bk-24180-VZ Page $28 \underset{\text{Case number (if known)}}{\text{of } 43}$ 2:17-bk-24180-VZ Main Document

Debtor 1 Jacqueline E. Nix

 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other th transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your preinclude gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 												
	☐ Yes. F	ill in the details.										
	Person Who Received Transfer Address			Description and value of property transferred			Describe any property or payments received or debts paid in exchange			Date transfer was nade		
	Person's	relationship to you										
	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No											
	_	ill in the details.										
	Name of t	rust		Description and	value of the pr	opert	y trans	ferred		Date Transfer was		
Por	liet.	of Certain Financial Accounts, I	notru	monto Safa Danas	it Boyon and	Storo	ao Unit	•		nauc		
Fair	t 8: List	or Certain Financial Accounts, i	nstrui	ments, sale Depos	it boxes, and	Stora	ge Unit	S				
		ear before you filed for bankrup	tcy, w	ere any financial a	ccounts or ins	trume	ents he	ld in your name, or fo	or you	r benefit, closed,		
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.											
	■ No											
	Yes. F	ill in the details.										
				st 4 digits of Type of account or count number instrument			or Date account was closed, sold, moved, or transferred			Last balance before closing or transfer		
	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?											
	No											
	☐ Yes. F	ill in the details.										
		Financial Institution Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)			Describe the contents			Do you still have it?		
22.	Have you s	stored property in a storage uni	t or pl	ace other than you	r home within	1 yea	ır befor	e you filed for bankr	uptcy	?		
	■ No	"III in the detaile										
		ill in the details.				_						
		Storage Facility Number, Street, City, State and ZIP Code)		Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)			scribe t	the contents		Do you still have it?		
Day	ldon	sife Dranaute Van Hald as Cantr	al far	Compone Floo								
Part 23.		tify Property You Hold or Contro Id or control any property that s			lude any prope	erty yo	ou borr	owed from, are stori	ng for	, or hold in trust		
	for someon	ne.										
	■ No □ Yes.	Fill in the details.										
	Owner's N Address (I	lame Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)			Describe the property			Value			
Part	t 10: Give	Details About Environmental Ir	nforma	ation								

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Page 29 of 43 Main Document

Case number (if known) 2:17-bk-24180-VZ

Debtor 1 Jacqueline E. Nix

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environal notices. No												
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details.												
☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it 25. Have you notified any governmental unit of any release of hazardous material? No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements No □ Yes. Fill in the details.	nental law?											
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it XIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details.												
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it Environmental law? Include settlements No Yes. Fill in the details.	Date of notice											
 Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements No Yes. Fill in the details. 	Have you notified any governmental unit of any release of hazardous material?											
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) know it No Yes. Fill in the details.												
■ No □ Yes. Fill in the details.	Date of notice											
Yes. Fill in the details.	and orders.											
Case Title Nature of the case												
Case Number Name Address (Number, Street, City, State and ZIP Code)	Status of the case											
Part 11: Give Details About Your Business or Connections to Any Business												
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to a	ny business?											
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time												
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)												
☐ A partner in a partnership	☐ A partner in a partnership											
☐ An officer, director, or managing executive of a corporation												
☐ An owner of at least 5% of the voting or equity securities of a corporation												
No. None of the above applies. Go to Part 12.												
Yes. Check all that apply above and fill in the details below for each business.												
Business Name Describe the nature of the business Employer Identification number												
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper	number or IIIN.											
Dates business existed												
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Inc institutions, creditors, or other parties.	lude all financial											
■ No □ Yes. Fill in the details below.												
Name Address (Number, Street, City, State and ZIP Code)												

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 30 of 43

Case number (if known) 2:17-bk-24180-VZ

Debtor 1 Jacqueline E. Nix

18 U.S.C. §§ 152, 1341, 1519, and 3571.

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

/s/ Jacqueline E. Nix	
Jacqueline E. Nix	Signature of Debtor 2
Signature of Debtor 1	
Date November 30,	2017 Date
Did you attach addition	Il pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
□ Yes	
Did you pay or agree to	pay someone who is not an attorney to help you fill out bankruptcy forms?
No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 2:17-bk-24180-VZ

Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 31 of 43

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Central District of California

In r	e	Jacqueline E.	Nix				Case No.	2:17-bk-24180-VZ
						Debtor(s)	Chapter	13
		DIS	CLO	OSURE OF COMP	PENSATI(ON OF ATTOR	NEY FOR DE	CBTOR(S)
1.	con	npensation paid to	o me v	29(a) and Fed. Bankr. P. 20 within one year before the face debtor(s) in contemplati	filing of the pe	tition in bankruptcy, o	r agreed to be paid	to me, for services rendered or to
		For legal servic	es, I h	ave agreed to accept			\$	4,000.00
		Prior to the filir	ng of t	his statement I have receiv	/ed		\$	4,000.00
		Balance Due					\$	0.00
2.	The	e source of the co		sation paid to me was:				
		Debtor		Other (specify):				
3.	The	e source of compe	ensatio	on to be paid to me is:				
		Debtor		Other (specify):				
4.		I have not agreed	d to sh	are the above-disclosed co	ompensation w	ith any other person u	nless they are memb	pers and associates of my law firm.
				the above-disclosed compo , together with a list of the				or associates of my law firm. A ched.
5.	In	return for the abo	ve-dis	closed fee, I have agreed to	to render legal	service for all aspects	of the bankruptcy c	ase, including:
	b. c.	Preparation and f Representation o [Other provisions Negotiation reaffirmate	filing of the design as new the construction and the construction are constructed and the construction and the construction and the construction are constructed and the construction and the construction are constructed and the construction and the construction are constructed a	of any petition, schedules, lebtor at the meeting of cre leded] vith secured creditors to	statement of a editors and con to reduce to ations as ne	fairs and plan which r firmation hearing, and market value; exer eded; preparation a	nay be required; any adjourned hea nption planning;	rings thereof; preparation and filing of the pursuant to 11 USC
6.	Ву	Represen	tatior	tor(s), the above-disclosed n of the debtors in any rsary proceeding.	d fee does not i dischargeal	nclude the following soility actions, judic	ervice: al lien avoidanc	es, relief from stay actions or
					CERTI	FICATION		
this		ertify that the fore kruptcy proceedir		is a complete statement of	f any agreemen	t or arrangement for p	ayment to me for re	presentation of the debtor(s) in
	Nov	ember 30, 201	7			/s/ Julie J. Villalob	os	
_	Date					Julie J. Villalobos : Signature of Attorney	263382	
						Oaktree Law		
						10900 183rd Street		
						Suite 270 Cerritos, CA 90703		
					-	Name of law firm		

Fill in this information to identify your case:								
Debtor 1	Jacqueline E. Nix							
Debtor 2 (Spouse, if filing)								
United States B	Bankruptcy Court for the: Central District of California							
Case number (if known) 2:17-bk-24180-VZ								

Check	as directed in lines 17 and 21:										
1	According to the calculations required by this Statement:										
 1. Disposable income is not determined 11 U.S.C. § 1325(b)(3). 											
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).										
	☐ 3. The commitment period is 3 years.										
4. The commitment period is 5 years.											

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

□ Not married. Fill out Column A, lines 2-11.

■ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own

				Colur Debt		Deb	ımn B tor 2 or -filing spouse
 Your gross wages, salary, tips, bonuses, overtim all payroll deductions). 	e, and c	ommissi	ons (before	\$	6,255.05	\$	11,250.00
 Alimony and maintenance payments. Do not inclu Column B is filled in. 	de paym	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3	ort. Included in the second of	de regula depende	r contributions ents, parents,	\$	0.00	\$	0.00
 Net income from operating a business, profession, or farm 	Debto	r 1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or	farm \$	0.00	Copy here ->	\$	0.00	\$	0.00
. Net income from rental and other real property	Debto	r 1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
		0.00	Copy here -> :	_	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 33 of 43

Debtor 1 Jacqueline E. Nix Page 33 01 43

Case number (if known) 2:17-bk-24180-VZ

			Column A Debtor 1		Column B Debtor 2 or non-filing s	
7.	Interest, dividends, and royalties		\$	0.00	\$	0.00
	Unemployment compensation		\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount under the Social Security Act. Instead, list it here:					
	For you\$	0.00				
	For your spouse \$	0.00				
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	ount received that was a	\$	0.00	\$	0.00
10.	. Income from all other sources not listed above. Spec Do not include any benefits received under the Social So received as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or payments nanity, or international or				
			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
	Total amounts from separate pages, if any.	+	. \$	0.00	\$	0.00
11.	. Calculate your total average monthly income. Add line each column. Then add the total for Column A to the total		6,255.05	+ \$ _	11,250.00	= \$ 17,505.05 Total average
12. 13.	. Copy your total average monthly income from line 1 Calculate the marital adjustment. Check one:	1.				\$17,505.05
	☐ You are not married. Fill in 0 below.					
	☐ You are married and your spouse is filing with you.	Fill in 0 below.				
	You are married and your spouse is not filing with y Fill in the amount of the income listed in line 11, Co dependents, such as payment of the spouse's tax I Below, specify the basis for excluding this income a	olumn B, that was NOT reguiability or the spouse's supp	ort of someone	e other th	nan you or you	r dependents.
	adjustments on a separate page.					
	If this adjustment does not apply, enter 0 below.	\$				
				_		
		+\$		_		
	Total	\$ _	0.00	Co	py here=>	0.00
14.	. Your current monthly income. Subtract line 13 from	line 12.				\$17,505.05
15.	Calculate your current monthly income for the year	Follow these steps:				
	15a. Copy line 14 here=>					\$17,505.05
	Multiply line 15a by 12 (the number of months in	a year).				x 12
	15b. The result is your current monthly income for the	year for this part of the form	n			\$210,060.60_

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 34 of 43

Debtor 1 Jacqueline E. Nix Case number (if known) 2:17-bk-24180-VZ

16	. Calculate the median family income that applies to	you. Follow these steps:		
	16a. Fill in the state in which you live.	CA		
	16b. Fill in the number of people in your household.	4		
	16c. Fill in the median family income for your state and	size of household.		_{\$} 89,444.00
	To find a list of applicable median income amounts			<u> </u>
17	instructions for this form. This list may also be ava . How do the lines compare?	iliable at the bankruptcy clerk's offi	ce.	
	17a. Line 15b is less than or equal to line 16c. 0	On the top of page 1 of this form, c	heck box 1, Disposable income i	s not determined under
	11 U.S.C. § 1325(b)(3). Go to Part 3. Do N			
	17b. Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcicopy your current monthly income from line	ulation of Your Disposable Incor		
Par	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Copy your total average monthly income from line 1	1	\$_	17,505.05
19.	Deduct the marital adjustment if it applies. If you are contend that calculating the commitment period under a spouse's income, copy the amount from line 13.	11 U.S.C. § 1325(b)(4) allows you t	to deduct part of your	
	19a. If the marital adjustment does not apply, fill in 0 or	i line 19a.	- \$_	0.00
	19b. Subtract line 19a from line 18.		(5)	17,505.05
20.	Calculate your current monthly income for the year.	Follow these steps:		47 EOE OE
	20a. Copy line 19b			\$17,505.05
	Multiply by 12 (the number of months in a year).		,	x 12
	20b. The result is your current monthly income for the y	rear for this part of the form		\$ 210,060.60
	20c. Copy the median family income for your state and	size of household from line 16c		\$ 89,444.00
	21. How do the lines compare?			
	· 			
	Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by the court, on the top	o of page 1 of this form, check bo	x 3, The commitment
	■ Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise ordered by the cou	ırt, on the top of page 1 of this for	m, check box 4, The
Pari	t 4: Sign Below			
	By signing here, under penalty of perjury I declare that	the information on this statement a	and in any attachments is true and	d correct.
)	(/s/ Jacqueline E. Nix			
•	Jacqueline E. Nix			
	Signature of Debtor 1			
	Date November 30, 2017 MM / DD / YYYY			
	If you checked 17a, do NOT fill out or file Form 122C-2			
	If you checked 17b, fill out Form 122C-2 and file it with	this form. On line 39 of that form, of	copy your current monthly income	e from line 14 above.

						_			
Fill in	this inf	ormation to ide	entify your case:						
Debto	or 1	Jacqueline	E. Nix						
Dobto	r 2								
Debto (Spou	ır∠ ıse, if filir	na)							
` '	•	<i>57</i>							
United	d States	Bankruptcy Cou	urt for the: Centra	al District of Califo	ornia				
Case (if kno		2:17-bk-241	180-VZ				☐ Check if this	s is an amende	ed filing
Officia	ıl Form	122C-2							
			ulation of	Your Disp	posable li	ncome			04/10
			need your compl Form 122C-1).	eted copy of Ch	apter 13 Statem	ent of Your Curren	t Monthly Inco	me and Calcula	tion of
space	is need	ed, attach a se		is form, Include	the line numbe	ether, both are equ r to which addition			
Part 1	: Ca	alculate Your D	eductions from	our Income					
the	questic	ons in lines 6-1	vice (IRS) issues 5. To find the IRS available at the ba	standards, go o	online using the	or certain expense link specified in th	amounts. Use le separate ins	these amounts tructions for thi	to answer the s form. This
exp	enses if	they are higher	than the standard	s. Do not include	any operating ex	ense. In later parts of penses that you substitute income in line 13	tracted from inc	come in lines 5 a	
If y	our expe	nses differ from	month to month,	enter the average	e expense.				
Not	te: Line r	numbers 1-4 are	not used in this fo	orm. These numb	ers apply to infor	mation required by a	a similar form us	sed in chapter 7	cases.
5.	The n	umber of peopl	e used in determ	ining your dedu	ctions from inco	ome			
	plus th	e number of any		dents whom you:		ederal income tax ronder may be differed		4	
Nat	tional St	andards	You must use	he IRS National S	Standards to ans	wer the questions in	lines 6-7.		
6.			other items: Using ollar amount for fo			d in line 5 and the If	RS National	\$	1,650.00
7.	the do people	llar amount for one who are 65 or one	out-of-pocket healt	h care. The numb er people have a	per of people is sp higher IRS allow	ntered in line 5 and olit into two categori ance for health car of 22.	espeople who	are under 65 and	d

Official Form 22C-2

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 36 of 43

Main Document Page 36 of 43

Jacqueline E. Nix

Case number (if known)

2:17-bk-24180-VZ

Peo	ple v	who are under 65 years of age								
	7a.	Out-of-pocket health care allowance per person	\$	49						
	7b.	Number of people who are under 65	Χ	4						
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	196.00	_	Copy here=>	\$	196	.00	
Peo	ple v	who are 65 years of age or older								
	7d.	Out-of-pocket health care allowance per person	\$	117						
		Number of people who are 65 or older	X							
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=>	\$	0	.00	
	• • •	Castotali Mattiply into ra sy into ro.	Ψ	0.00	-		Ψ		.00	
	7g.	Total. Add line 7c and line 7f			\$	196.00		Copy total h	nere=>	\$ 196.00
Loc	al St	andards You must use the IRS Local Standards t	o an	swer the quest	ons in line	es 8-15.				
		n information from the IRS, the U.S. Trustee Prottcy purposes into two parts:	gran	n has divided t	he IRS L	ocal Standard	l foi	r housing f	or	
■ F	lous	ing and utilities - Insurance and operating expen	ses							
= +	lous	ing and utilities - Mortgage or rent expenses								
		er the questions in lines 8-9, use the U.S. Truste						e using the	links	specified in the
8.	Ηοι	e instructions for this form. This chart may also busing and utilities - Insurance and operating expense the dollar amount listed for your county for insuran	ense	s: Using the nu	ımber of p			d in line 5,	\$_	660.00
9.	Ηοι	using and utilities - Mortgage or rent expenses:								
	9a.	Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense		the dollar amo	unt		\$	2,324	.00	
	9b.	Total average monthly payment for all mortgages a	and o	other debts sec	ured by y	our home.				
		To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.								
		Name of the creditor		Average mo payment	nthly					
		Fay Servicing LLC		\$ 6,8	800.00					
						7				
		9b. Total average monthly paymen	t	\$6,8	800.00	Copy here=> -	.	6,80	0.00	Repeat this amount on line 33a.
	9c.	Net mortgage or rent expense.								
		Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, en			ge	\$			opy ere=>	\$
10.		ou claim that the U.S. Trustee Program's division					s in	correct and	d	\$ 0.00
	Ex	plain why:		•	•	-				
		•							_	

Debtor 1

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Main Document Page 37 of 43 Jacqueline E. Nix 2:17-bk-24180-VZ Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 600.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 2015 Acura RDX 15.000 miles 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **American Honda** 80.00 Repeat this Copy amount on Total Average Monthly Payment 80.00 80.00 here => line 33b Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 405.00 405.00 \$ => Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment -NONE-Copy Repeat this here amount on line Total average monthly payment 0.00 0.00

13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0,	, enter \$0	[\$ 0.00	Copy ne Vehicle expense =>	2	0.00
14.	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of w	, ,		,	n the	\$	0.00

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

0.00

Debtor 1 Jacqueline E. Nix Case number (if known) 2:17-bk-24180-VZ

Oth	er Necessar	y Expenses	In addition to the expense of the following IRS categories		s listed above	, you are allowed your monthly expense	s for	
16.	self-employ from your pa 12 and subt	ment taxes, soc ay for these taxe tract that numbe	ial security taxes, and Medic	care taxe receive	s. You may inday inday inday inday inday in a second i	nd local taxes, such as income taxes, clude the monthly amount withheld you must divide the expected refund by pay for taxes.	\$	4,943.00
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.							
	Do not inclu	ide amounts tha	t are not required by your jo	b, such a	s voluntary 40	01(k) contributions or payroll savings.	\$	0.00
18.	filing togeth Do not inclu	er, include payn	nents that you make for your r life insurance on your depe	r śpouśe'	s term life insu	fe insurance. If two married people are urance. g spouse's life insurance, or for any form	\$	75.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.							0.00
20.			nly amount that you pay for e					
		dition for your jo						
	_			t child if r	no public educ	ation is available for similar services.	\$	0.00
21.	Childcare: preschool.	The total month	ly amount that you pay for c	hildcare,	such as baby	sitting, daycare, nursery, and		
	Do not inclu	ide payments fo	r any elementary or seconda	ary schoo	ol education.		\$	0.00
22.	that is requi	ired for the healt		depende	ents and that i	amount that you pay for health care s not reimbursed by insurance or paid		
	•	J	nce or health savings accou				\$	0.00
23.	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						+\$	0.00
24.	Add all of t		llowed under the IRS expe	nse allo	wances.		\$	8,529.00
Add		ense Deduction	s These are additional d Note: Do not include a					
25.		disability insurar				nses. The monthly expenses for health oly necessary for yourself, your spouse, o	or	
	Health insur	rance		\$	150.00			
	Disability in	surance		\$	0.00			
	Health savir	ngs account	+	\$	0.00	7		
	Total			\$	150.00	Copy total here=>	\$	150.00
		ually spend this the How much do y	otal amount? ou actually spend?			_		
	Yes			\$				
26.	continue to of your house	pay for the reas sehold or memb	onable and necessary care	and supp who is u	oort of an elder nable to pay fo	e actual monthly expenses that you will rly, chronically ill, or disabled member or such expenses. These expenses C. § 529A(b)	\$	0.00
27.						enses that you incur to maintain the		
		•	y under the Family Violence the nature of these expens			ses Act or other federal laws that apply.	\$	0.00

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 39 of 43

	Jacqueline E. Nix	Cas	e number (<i>if known</i>	2.17-	bk-24	100 1	
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operating	g expense	s on		
	If you believe that you have home energy of line 8, then fill in the excess amount of hom	osts that are more than the home energy cos ne energy costs	ts included in	expenses	on		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must	show that the	additional		\$	0.00
		Iren who are younger than 18. The monthly pendent children who are younger than 18 ye					
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why the	e amount			
	* Subject to adjustment on 4/01/19, and ev	ery 3 years after that for cases begun on or a	fter the date of	adjustme	nt.	\$	0.00
		he monthly amount by which your actual food allowances in the IRS National Standards. T s in the IRS National Standards.					
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		oarate			
	You must show that the additional amount	claimed is reasonable and necessary.				\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organization.	e amount that you will continue to contribute in inization. 11 U.S.C. § 548(d)(3) and (4).	n the form of c	ash or fina	ancial		
	Do not include any amount more than 15%	of your gross monthly income.				\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.				\$	150.00
Ded	uctions for Debt Payment						
	doctions for Best Fayment						
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paym	ent, add all amounts that are contractually du					
33. F I	For debts that are secured by an interest pans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually du					e monthly
33. F - 7	For debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymereditor in the 60 months after you file for band of the month of the m	33a through 33e. ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	ue to each secu	ured		paymen	t
33. F I	For debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymereditor in the 60 months after you file for band of the month of the m	33a through 33e. ent, add all amounts that are contractually du	ue to each secu	ured		paymen	
33. F	For debts that are secured by an interest coans, and other secured debt, fill in lines or calculate the total average monthly paymereditor in the 60 months after you file for backwork mortgages on your home Copy line 9b here Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	e to each seco	ured		paymen	t
33. F I o	For debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for band Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	: 33a through 33e. ent, add all amounts that are contractually du nkruptcy. Then divide by 60.	ie to each seci	ured	=>	paymen	6,800.00
33. F I o	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for band of the months after you file for band of th	33a through 33e. ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	ie to each seci	ured	=>	paymen	6,800.00 80.00
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33. F I o	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for band of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	Do incor	pes payme clude taxes insurance No Yes	=> => ent s	\$\$ \$\$ \$	6,800.00 80.00
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33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for band of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	Do incorr	pes payme clude taxes insurance No Yes No Yes	=> => => ent ss?	paymen \$ \$ \$ \$ \$ \$	6,800.00 80.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for band of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	Do incorr	pes payme clude taxes insurance No Yes No Yes	=> => => ent ss?	\$\$	6,800.00 80.00

Main Document Page 40 of 43 Case number (if known) 2:17-bk-24180-VZ Jacqueline E. Nix

		e 33 secured by your prima our support or the support			Э,				
□ No.	Go to line 35.								
■ Yes.		must pay to a creditor, in acossession of your property (con the information below.							
Name of the	creditor	Identify property that secure	es the deb	ot	Total cu	re amount		Monthly mount	cure
		24107 Cross Street N	ewhall,						
Fay Servi	cing LLC	Los Angeles County		\$	2	40,000.00			4,000.00
				\$ \$	-		$\div 60 = \$$ $\div 60 = +\$$		
							Copy		
				Total	\$	4,000.00	total	\$ _	4,000.00
		uch as a priority tax, child ate of your bankruptcy cas							
☐ No.	Go to line 36.								
Yes.		all of these priority claims. Do		ude current or					
	Total amount of all past-	due priority claims			\$	12,500.00	÷ 60	\$	208.34
36. Projecte	d monthly Chapter 13 plan				\$	4,440.00			
Office of the Exec To find a I	the United States Courts (fourtive Office for United State ist of district multipliers that inclu	stated on the list issued by the districts in Alabama and N is Trustees (for all other districts your district, go online using a may also be available at the ban	orth Card icts). the link sp	olina) or by ecified in the	X	6.60	_		
Average	monthly administrative expe	ense			\$	293.04	Copy tota here=>		293.04
	of the deductions for deb es 33e through 36.	t payment.						\$	11,381.38
Total Deduc	tions from Income								
38. Add all d	of the allowed deductions.								
	ne 24, All of the expenses a e allowances	llowed under IRS	\$	8,529.00)				
Copy lir	ne 32, All of the additional e	xpense deductions	\$	150.00)				
Copy lir	ne 37, All of the deductions	for debt payment	+\$	11,381.38	<u> </u>				
Total de	eductions		\$	20,060.38	S Cop	y total here=>	•	\$	20,060.38

Debtor 1

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 41 of 43

Case number (if known) 2:17-bk-24180-VZ Jacqueline E. Nix Debtor 1 Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1. Chapter 13 17.505.05 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 0.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 20,060.38 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Сору 0.00 0.00 Total \$ Copy 44. Total adjustments. Add lines 40 through 43. 20.060.38 20,060.38 here=> -\$ -2,555.33 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? □ 122C-1 ☐ Increase ■ 122C-2 ■ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ Increase ☐ 122C-1

☐ 122C-2 ☐ 122C-1

☐ 122C-2

☐ Decrease

☐ Increase

☐ Decrease

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 42 of 43

Debtor 1 Jacqueline E. Nix Case number (if known) 2:17-bk-24180-VZ

Part 4:	Sign Below
E	signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.
X	/ Jacqueline E. Nix
	gnature of Debtor 1
	ovember 30, 2017
	M/DD/YYYY

Case 2:17-bk-24180-VZ Doc 10 Filed 11/30/17 Entered 11/30/17 12:54:11 Desc Main Document Page 43 of 43 Attorney or Party Name, Address, Telephone & FAX Nos., FOR COURT USE ONLY State Bar No. & Email Address Julie J. Villalobos 263382 10900 183rd Street Suite 270 Cerritos, CA 90703 California State Bar Number: 263382 ☐ Debtor(s) appearing without an attorney Attorney for Debtor UNITED STATES BANKRUPTCY COURT **CENTRAL DISTRICT OF CALIFORNIA** In re: CASE NO.: 2:17-bk-24180-VZ Jacqueline E. Nix CHAPTER: 13 **VERIFICATION OF MASTER** MAILING LIST OF CREDITORS [LBR 1007-1(a)] Debtor(s). Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 1 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions. Date: November 30, 2017 /s/ Jacqueline E. Nix Siganture of Debtor 1 Date: Signature of Debtor 2 (joint debtor)) (if applicable) Date: November 30, 2017 /s/ Julie J. Villalobos Signature of Attorney for Debtor (if applicable)